

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT OR OTHER COURT SERVICES WITHOUT PAYMENT OF FEE

(Rev. 5/98)

IN UNITED STATES MAGISTRATE DISTRICT APPEALS COURT or OTHER PANEL (Specify below)

IN THE CASE OF

U.S.

VS.

Ernest Preston

FOR

AT

LOCATION NUMBER

PERSON REPRESENTED (Show your full name)

Ernest Preston

Defendant - Adult
 Defendant - Juvenile
 Appellant
 Probation Violator
 Parole Violator
 Habeas Petitioner
 2255 Petitioner
 Material Witness
 Other (Specify) _____

DOCKET NUMBERS

Magistrate

08er46011

District Court

08cr466-11

Court of Appeals

FILED

JUN 26 2008

CHARGE/OFFENSE (describe if applicable & check box →) Felony Misdemeanor

18 USC 1028A(g)(1), 1343

ANSWERS TO QUESTIONS REGARDING WHETHER PAID PAY

U.S. District Court

Vollet III

EMPLOYMENT	Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self Employed		
	Name and address of employer: D.D. Dept. of Transportation		
ASSETS	IF YES, how much do you earn per month? \$ 4,788		
	IF NO, give month and year of last employment How much did you earn per month? \$ _____		
OTHER INCOME	If married is your Spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	IF YES, how much does your Spouse earn per month? \$ _____		
If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____			
CASH	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY \$ _____ RECEIVED & IDENTIFY \$ _____ SOURCES		
PROPERTY	IF YES, GIVE THE VALUE AND \$ _____ VALUE DESCRIBE IT _____ DESCRIPTION		
	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

OBLIGATIONS & DEBTS

DEPENDENTS	MARITAL STATUS		Total No. of Dependents 7	
	<input type="checkbox"/> SINGLE	<input type="checkbox"/> MARRIED		
	<input type="checkbox"/> WIDOWED	<input checked="" type="checkbox"/> SEPARATED OR DIVORCED		
DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME: Rent Credit cards		Total Debt \$ 3,000 \$ 4,000 \$ _____ \$ _____ \$ 800	Monthly Payt. \$ 1,100.00 \$ _____ \$ 500 \$ 800
	Medical bill			
	Food			
	Gasoline, utilities, insurance			

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) 6-26-08

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Ernest Preston